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Fees pursuant to the Consolidated Approp	oriations (C) 2015 (B) R 4818)	Co	omplete If Known	
FEE TRANS	MITTA 18	Application Number	10/604,875	
FEE IRANS	MAD 1 2 2007	Filing Date	08/22/2003	
for FY 2	096 ^{MAR 1 2 2007}	First Named Inventor	Monteverde	
		Examiner Name	Zand, Kambiz	
Applicant claims small entity status	. See 3	Art Unit	2132	
TOTAL AMOUNT OF PAYMENT	(\$)135.00	Attorney Docket No.	35041/400300	

							 	
METHOD OF PAYMENT (check all that apply)								
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Deposit Account Deposit Account Number: 19-1351 Deposit Account Name: Seyfarth Shaw LLP								
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FEE CALCULATION	(All the fees	below are di	ue upon filing o	or may be subj	ject to a surch	narge.)		
1. BASIC FILING, SEA			•					
	FILING FEES			SEARCH FEES		TION FEES		
A It - a At a .a. T		mall Entity	_	Small Entity	Foo (\$)	Small Entity	Fees Paid (\$)	
Application Type	Fee (\$)	<u>Fee (\$)</u> 150	<u>Fee (\$)</u> 500	<u>Fee (\$)</u> 250	<u>Fee (\$)</u> 200	<u>Fee (\$)</u> 100	rees raid (4)	
Utility	300		-	50	130	65		
Design	200	100	100			-		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0 _		
2. EXCESS CLAIM FE	ES					<u>S</u> :	mall Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (inc	_	•	og)			50 200	25 100	
Each independent clain Multiple dependent clair	•	luding Keissu	es)			360	180	
Total Claims	Extra Cla	ims Fee	(\$) Fees Pa	id (\$)		Multiple Depe		
- 20 or HF	•	× 25.00	= 75.00			Fee (\$)	Fee Paid (\$)	
HP = highest number of total of	claims paid for, if	greater than 20					75.00	
Indep. Claims	Extra Clai	<u>ms</u> <u>Fee</u>	(\$) Fees Pa	id (\$)				
- 3 or HP		x	=					
HP = highest number of indep	endent claims pa	aid for, if greater t	han 3		•			
3. APPLICATION SIZE		1 100	.14 C	(1	-4i-alle: Ele			
If the specification listings under 37 C	and drawing	the application	sneets of paper	(excluding ele	or small entity	o sequence or Tor each addi	tional 50	
sheets or fraction the					or sman chiny) for cach add	tional 30	
	xtra Sheets		ber of each addi		tion thereof	<u>Fee (\$)</u>	Fee Paid (\$)	
- 100 =		/50=	(round	up to a whole nu	mber) x _			
4. OTHER FEE(S)							Fee Paid (\$)	
Non-English Speci				ount)				
Other (e.g., late filing surcharge): Extension of time							60.00	

phone 312-460-5000
3/07/07
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